



A young child engaged in an educational activity at Cradle Care. Photo by CAD

“Before Cradle Care we [came] for trainings but could not concentrate in the session and would leave early. The children would sometimes cry, sometimes they would talk to us seeking our attention and so we [felt] like leaving early.”

- Mother using Cradle Care services

Gender Responsive Programming

Helping HIV infected and affected women access care and support

OVERVIEW

There are currently 2.4 million people living with HIV (PLHIV) in India making it the country with the third highest number of PLHIV in the world. Located in the North East region of India, Nagaland is the state with the fourth highest adult HIV prevalence in India (0.78%). HIV prevalence among antenatal care clients in Nagaland has increased from 0.60% in 2006 to 1.07% in 2010. Women face several barriers in accessing HIV care and support services, including the choice many HIV-positive mothers must make between caring for their young children or caring for their own needs as PLHIV.

PROMISING PRACTICE

In North East India, Catholic Relief Services (CRS) engages in HIV care and support through Project LIFE AID. A key component of LIFE AID is training PLHIV and caregivers on positive living, HIV treatment education, prevention of parent-to-child transmission and home-based care. Community Awareness and Development (CAD) Foundation is a LIFE AID implementing partner which operates a project-supported Positive Living Center (PLC) in Dimapur (Nagaland). In response to PLC staff observations that training participation was low among HIV-positive women with young children, CAD established a child care service called Cradle Care. Subsequently, training attendance increased among women who used the Cradle Care service.

STEPS IN IMPLEMENTATION

- **Problem Identification.** While conducting home visits in January 2010, CAD staff identified female clients who did not have sufficient child care support at home.

This was resulting in low training attendance among women with young children.

- **Proposed Solution.** Following consultation with female clients with young children, CAD proposed to begin an on-site day care service at the PLC.

- **Resource mobilization.** CAD mobilized Rs. 2,000 (80 USD) to purchase a mat, story books, toys and diapers. The local community also donated toys and school supplies. With these provisions, CAD converted one room at the PLC for child care services.



Children attending Cradle Care at the CAD Positive Living Center in Dimapur. Photo by CAD

“[Cradle Care] was a legitimate felt need of both the organization and beneficiaries.”

- Teiso Solo, Chief Functionary of CAD Foundation

LESSONS LEARNED

- Adapting program strategies and approaches to more effectively respond to the specific barriers faced by women living with HIV can facilitate increased access to care and support services.
- Consultation with project beneficiaries and stakeholders before interventions are implemented can result in added participation and support.
- Staff with previous child care experience enables Cradle Care to be an opportunity for children to learn and grow in a positive environment.

CRS is the international humanitarian agency of the Catholic community in the United States. The agency provides assistance to people in more than 100 countries and territories based on need, regardless of race, nationality or creed. CRS has been present in India since 1946. Its national office is located in New Delhi. CRS technical publications are available for free at www.crsprogramquality.org.

- **Launch.** In March 2010, Cradle Care began at the CAD Positive Living Center. Services were made available when trainings were being conducted, and on clinic days, so that women could more easily attend health check-ups and counseling services at the PLC. Eligible clients (i.e. women with young children) were informed of the service during routine home visits.
- **Staffing.** Cradle Care operates with the support of three CAD staff. One female Outreach Worker and one Community Mobilizer, who has prior experience teaching children, are responsible for toddlers and older children. The PLC Nurse takes care of infants when she is not needed to facilitate training sessions. There is an average ratio of one staff member per three children attending Cradle Care.
- **Services.** Cradle Care operates one to two days per week. It includes a mix of structured educational activities and play time. School-age children are assisted with reading, writing, and math skills while younger children are entertained with age-appropriate toys and art projects.

POSITIVE OUTCOMES

- Among female registered PLHIV clients who use Cradle Care, the average number of trainings attended increased from 1.7 before to 3.3 after the service was introduced.
- During the project, positive mothers who use Cradle Care are eight times more likely to attend three or more training sessions than those eligible women who do not use Cradle Care (2008-2012).
- Cradle Care fosters stronger relationships among the PLC and the people it serves. Getting to know the children of clients and sharing in their care has deepened trust and familiarity between clients and staff. As a result, home visits and interaction at the PLC are friendlier and less formal.

CONCLUSIONS

Cradle Care can help HIV-infected mothers with young children to access services and attend trainings without interruption from their child care responsibilities. However, Cradle Care was used by only one-third (32%) of the women with young children who were eligible for the service. Further exploration is required to understand why the majority of women were not accessing Cradle Care services and whether those factors affected their training attendance.

The promotion of affordable child care services to empower young mothers living with HIV to increase their utilization of treatment services or engage in livelihood activities was beyond the scope of Cradle Care’s objective. But the increased training attendance observed among Cradle Care users, points toward the potential of such a service to support women’s improved access to services and opportunities outside the home.

Partnership

To implement Project LIFE AID, CRS works with Catholic Medical Center in Imphal, Zoram Entu Pawl, Development Association of Nagaland, Nagaland Development Outreach, Don Bosco, Social Awareness Service Organization, Manipur Network of Positive People, Kripa Foundation, Positive Network of Mizoram and Community Awareness and Development Foundation. This four-year project (2008–2012) is funded entirely by CRS.